

RECEIVED  
CENTRAL FAX CENTER  
JUL 21 2010**Fax**

<b>Attention:</b> Group Art Unit: 1795	<b>From:</b> Travis Dodd
<b>Fax:</b> 571-273-8300	<b>Fax:</b> 818-833-2065
<b>Phone:</b>	<b>Phone:</b> 818-833-2014
<b>Company:</b> U.S. Patent and Trademark Office	<b>Company:</b> Quallion LLC
<b>Pages:</b> Total of (15) Pages	
<b>Re:</b> Application Serial No.: 10/665,687 Title: ELECTRIC STORAGE BATTERY CONSTRUCTION AND METHOD OF MANUFACTURE Filed: September 17, 2003 Examiner: Robert Hodge Group Art Unit: 1795 Attorney Docket No.: Q137-US6	
<b>Date:</b> July 21, 2010	

☐ Urgent ☒ For Review ☐ Please Comment ☒ Please Reply ☐ Please Recycle

If you have any questions or did not receive this transmission in its entirety, please call (818) 833-2000, extension 2014.

**CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)**

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 571-273-8300 on July 21, 2010:

Amendment Transmittal Letter (1 page)  
Fee Transmittal (1 page)  
Amendment (12 pages)

Lisa K. Robbins

(Name of Person Signing Certificate)

  
(Signature)**Quallion LLC**

PO Box 823127, Sylmar, CA 91382-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

NOTICE: This message is confidential, may be legally privileged, and is for the intended recipient only. Access, disclosure, copying, distribution, or reliance on any of it by anyone else is prohibited and may be a criminal offense. If it has been sent to you in error, please advise the sender of the error and immediately destroy this message.

JUL 21 2010

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/665,687
		Filing Date	September 17, 2003
		First Named Inventor	David Skirio
		Group Art Unit	1795
		Examiner Name	Robert Hodge
Total Number of Pages in This Submission		Attorney Docket Number	Q137-US6

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Amendment After Final Affidavits/Declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s)  Licensing-related Papers  Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
Remarks		

Customer Number or Bar Code Label

31815

(Insert Customer No. or Attach bar code label here)

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dated: 07/21/2010

 Phone: (818) 833-2003  
 Fax: (818) 833-2065

By:

  
 Travis Dodd  
 Attorneys for Applicant(s)  
 P.O. Box 923127  
 Sylmar, CA 91392-3127

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: _____			
Typed or printed name	TRAVIS DODD		
Signature		Date	

RECEIVED  
CENTRAL FAX CENTER

JUL 21 2010

## FEE TRANSMITTAL

Attorney Docket No.	Q137-US6
First Named Inventor:	SKINLO, David
Application Number	10/665,687
Filing Date:	September 17, 2003
Examiner Name:	1795
Group/Art Unit:	Robert Hodge

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ .00</b>
<b>METHOD OF PAYMENT (check One)</b>	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order Other - Credit Card

## 2. UTILITY Basic Filing Fee &amp; Claims


(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$330.00	\$165.00	\$0.00
Total Claims	27 - 65 =	0	X \$52.00	X \$26.00	\$0.00
Independent Claims	1 - 3 =	0	X \$220.00	X \$110.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$390.00	\$195.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$220.00	\$110.00	\$0.00
Reissue filing fee	\$330.00	\$165.00	\$0.00
Provisional filing fee	\$220.00	\$110.00	\$0.00
Total of above Calculations =			\$0.00

## 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature:		Date	07/21/2010